PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

028732002

CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL ENTITY TYPE				OTHER THAN MALL ENTITY	
TOTAL CLAIMS					(Column 2)		ſ			OR I [
FOR			26 NUMBER FILED		NUMB	NUMBER EXTRA		RATE BASIC FEE	FEE 355.00	OB	RATE BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			26 minus 20=		*		ľ	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS					•			X40=		OR	X80=		
.MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=		
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	in column 2		TOTAL	357	OR	TOTAL		
	С	LAIMS AS A	MENDED - PART II				• • • • • • • • • • • • • • • • • • •				OTHER THAN		
(Column 1)				(Column 2		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=		
	FINOT FRESE	NTATION OF IM	JUITLE DE	ENDEN	CLANVI			+135=		OR	+270=		
							i.	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)	,	40011. FEE (ADDII. I EE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	F CL AINA	=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	JUIPLE DEF	CINDEIN	CLAIM		֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֡֓֡	+135=		OR	+270=		
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,	
	Independent	*	Minus	***	T () A () A	=		X40=		OR	X80=		
Ļ	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDEN	CLAIM		ا ا	+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		nher Previously Pa					er fou	ind in the ani	propriate bo	k in co	lumn 1.		